Form 85-131-99-8-1-000 (Rev. 12/99)

Mississippi S-Corporation

Schedule K	Snarenc	piaers 3	onares of incor	ne	
Page 1	Υ	ear			
Name of S-Corporation			Fi	EIN	
CURRENT YEAR'S TAX CREDITS (From	n Form 83-401)	<u> </u>	Code	Credit Amount
Ad Valorem Tax Credit (From Schedule 2. Other credits: (Enter description and code)	A, Form 83-401 de number from) Schedule B,	,	1 4	
a. b. c.					
d Enter Shareholder information below. If addit					
Litter Shareholder Illiothiation below. If addit	lonar space is in	eeded use a	_	llocations to Shareholde	ers
		(C) State of Residence	RESIDENTS	PENTS NON-RESIDENTS	
(A) Name, Address & SSN/ FEIN of Each Shareholder	(B) Ownership Percentage		(D-1) Total Net Income (Fully Taxable)	(E-1) Total Amount of MS Income (Taxable)	(F) Total Amount of Non-MS
			(D-2) Total Credits (Memo Entry)	(E-2) Total Credits (Memo Entry)	Income (Not Taxable)
(a)	%				
SSN/FEIN:					
(b)	%				
SSN/FEIN:	,,				
(c)	%				
SSN/FEIN:	70				
(d)	%				
SSN/FEIN:	,,,				
(e)	%				
SSN/FEIN:	,,,				
(f)	%				
SSN/FEIN:	70				
(g)	%				
SSN/FEIN:	70				
		1			
Amounts from Page 2	%	XXXX			

TOTALS (Column B, D-1, E-1, & F) |%| XXXX |\$ AMOUNT ALLOCATED TO SHAREHOLDERS - (Total of Columns D-1, E-1, & F)

Mississippi S-Corporation Shareholders Shares of Income

Schedule K

Page 2

FEIN			

			А	ers	
(A) Name, Address & SSN/FEIN of Each Shareholder		(C) State of Residence	RESIDENTS NON-RESIDENT		SIDENTS
	(B) Ownership Percentage		(D-1) Total Net Income (Fully Taxable)	(E-1) Total Amount of MS Income (Taxable)	(F) Total Amount of Non-MS Income (Not Taxable)
			(D-2) Total Credits (Memo Entry)	(E-2) Total Credits (Memo Entry)	
(h)					
	%				
	/"				
SSN/FEIN:					
(1)					
	%				
SSN/FEIN:					
(j)					
	%				
	/0				
SSN/FEIN: (k)					
(1)					
	%				
SSN/FEIN:					
(1)					
	%				
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SSN/FEIN: (m)					
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	%				
SSN/FEIN:					
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(0)					
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SSN/FEIN:					
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OON/EEN					
SSN/FEIN:	+				
\T/					
	%				
SSN/FEIN:					

TOTALS - Columns B, D-1, E-1, and F (To Page 1)	%	XXXX	\$ \$	\$